

**SHREWSBURY PUBLIC SCHOOLS
100 MAPLE AVENUE
SHREWSBURY, MASSACHUSETTS**

COURSE APPROVAL FORM

(Use this form for approval of educational courses for college credits or CEU's)

Name _____ Date _____

Complete
Address _____

Please indicate your school: () Beal () Beal West () Coolidge () Floral () High School () Oak
() Parker Road () Paton () Spring () Sherwood

Name of Institution: _____

Name of Course: _____

Course No. _____ Dates of Course _____

Number of Credits _____ or CEU's _____ Approximate Cost \$ _____

Reimbursement: _____ \$400.00 reimbursement or _____ One time full reimbursement
(once within a three year period and up to \$1,200)

Approved by _____ Date _____
Assistant Superintendent of Schools

Note: Upgrade to Masters requires a copy of college verification (certificate, transcript with date of when degree was awarded). When applying for B+15 please call the Central Office for more information.

When requesting reimbursement, please provide a copy of cancelled check or credit card statement and a copy of your grade report or transcript.

Central Office Use Only 10235199-510900 Year: _____

Date: _____ Type or Reimbursement: _____ Amount: \$ _____

Vendor # _____ Warrant _____ Batch _____ Date _____